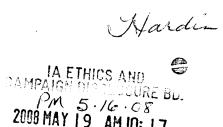
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319



FOR INSTRUCTIONS, SEE BACK OF FORM



Fax: 515-281-4073	DISCLOSURE SUMI	MARY PAGE	UUB MAY 19	AM 10: 17
COMMITTEE NAME (Must b	e same as on Statement of Organization)	-		
IMPORTANT: Indicate by # type (1) Statewide/Legislative/Judge (4) County Central Committee (for Hardin Count of committee you are reporting for: 5 Standing for Retention Candidate (2) State PA 5) County Candidate (6) City Candidate (7) S ty PAC (9) City PAC (10) School Board or Ot	C (3)State Party	1 1	2 DISCLOSURE
CANDIDATE COMMITTEES Candidate Name Bryce Knuc Office Sought Sheriff Late reports are subject to possi	dsen s	rict (if Senate or House)	Logged In Scanned Computer Audited	sm om
Michael M. SIGNATURE OF PERSON FIL	Heaten 104	1-648-6032 TELEPHONE	<u>5-15</u>	
·	eport date)	ORT FOR (1) ELECTION /(2 Indicate by #	_	ON YEAR.
Check if this is final (terminate	O REPORT DATEDation) report and attach Notice of Dissolution file reports until a DR-3 is filed.)	on Form DR-3.	Novemb	
STATEM	ENT OF CASH ON HAND			
committee. This amo	ning of the reporting period. (Total of all fu nunt MUST be the same as the cash on ha eriod or must be zero if this is first report fi	nd at the end	s	0 /
	TAKEN IN THIS PERIOD	,		
Schedule F: Loans F Schedule H: Total Sa	ontributions total (Attach Schedule A) (*als deceived total (Attach Schedule F)ales of Campaign Property (Attach Schedu	ile H)		1275. [©] 0
(Schedule F	applies to Candidates' Committees Or		,	1275 6
Schedule B: Expend	MONEY SPENT THIS PERIOD tures total (Attach Schedule B) (**also see			181. 58 0
	this reporting period (if final report balance			193.42
	ule D - Attach Schedule D)			0
	rom Schedule E - Attach Schedule E)			0
	om Schedule F - Attach Schedule F)			0
CONSULTANT BREAKDOWN	(Schedule G Attached?)		YES	× NO
CANDIDATE COMMITTEES O /ALUE OF CAMPAIGN PROP	NLY: ERTY (From Schedule H - Attach Schedu	le H)	\$	0

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form A ETHICS AND APAIGH DISCLOSURE & CONTRIBUTIONS MONEY TAKEN IN	Reserrorn	SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
(Including candidate's personal lynds) APR 13 AM 8: 27			CK THIS BOX IF
COMMITTEE NAME (Must be same as on Statement of Organization)		AME	nding form
Knudsen For Hardin County Sheriff	ļ		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE DOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER INCOME
5.07.08	ID# CK#	Bryce Knudsen 13697 MM Avenue Iowa Falls, IA 50126		\$500.00	
5.08.08	ID# CK#	Shirley Knudsen 119 Taft Street Coulter, IA 50431		25.00	
5.08.08	CK#	Tony Thics 1617 Elk Run Road Iowa Falls, IA 50126		750.00	
	ID#				
	CK#				<u> </u>
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			SUB-TOTAL	\$ 1275.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial rotationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)

\$ 1275.00

TOTAL (if last page of this schedule)

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EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

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PERMITTING R	UAME (1811)	ne samo as r	m sianemeni oi	CHOMINIZMIKINI
COMMISSION		20 20114 84 4	ALL ATMEDICATION OF	4.84444
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Knudsen for Hardin County Sheriff

	CANDIDATE	NAME AND ADDRESS TO WHOM	PURPOSE	AMOUNT
DATE EXPENDED (MM/DD/YR)	ID NUMBER (If applicable) AND PAC CHECK NUMBER	EXPENDITURE (Disbursamoni) WAS MADE	(DESCRIBE TRANSACTION)	EXPENDED
	iD#	Donahue	Magnets and Lubels	-
5.11.08	CK#1001	11205 Helber Road Logan, OH 43138		\$ 426.40
	ID#	My Campaign Store	T-shirts	
5.11.08	CK#1002	902 East Court Avenue Jeffersonville, IN 47130		355.18
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	ск#			
	ID#			
	CK#			
	ID#			
	CK#			
			SUB-TO	TAL \$ 781.58

THIS BOX APPL	IES TO	CANDID	ATES' COMM!	TTEES ONLY:

Purchases of cartain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 68A.402(3)(i).)

Page	1	αſ	1	
raye		 U		

\$ 781.58

TOTAL (If last page of this schedule)